FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

FORMER NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

Expires: April 30, 2008 Estimated average burden hours per form......16.00 SEC USE ONLY **Prefix** Serial **DATE RECEIVED**

OMB APPROVAL

OMB Number:3235-0076

(checkif this is an amendment and name has changed, and indicate change.) Name of Offering

Offering of Limited Partnership Interests of Meridian Diversified Fund, L.P. Rule 505

MAR LUNIFORM LIMITED OFFERING EXEMPTION

Filing Under (Check box(es) that apply): Type of Filing: ■ New Filing

☐ Rule 504 Amendment □ Rule 506

☐ Section 4(6)

A. BASIC IDENTIFICATION DATA

Enter the information requested about the issuer

check if this is an amendment and name has changed, and indicate change. Name of Issuer

Meridian Diversified Fund, L.P.

Address of Executive Offices

(Number and Street, City, State, Zip Coo.)

c/o Meridian Diversified Fund, LLC, 20 Corporate Woods Boulevard, 4th Floor, Albany, NY 12211

(518) 432-1000

a Code)

Address of Principal Offices (if different from Executive Offices)

(Number and Street, City, State, Zip Code)

Telephone Number (Including Area Code)

Brief Description of Business:

Investment in securities through a diverse group of investment managers

Type of Business Organization

□ corporation

Itimited partnership, already formed

other (please spe

limited partnership, to be formed ☐ business trust

FINANCIA

Actual or Estimated Date of Incorporation or Organization:

0 5

Year 0 1

□ Actual

Estimated

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State;

CN for Canada; FN for other foreign jurisdiction)

E

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

			A. BASIC ID	ENTIFICATION DAT	A	· · · · · · · · · · · · · · · · · · ·
•	Each beneficial owr Each executive office	ne issuer, if the iss ner having the pov cer and director of	suer has been organized with	ect the vote or disposition o	of, 10% or more of ging partners of pa	a class of equity securities of the issuer; rtnership issuers; and
Check E	Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Nar	ne (Last name first, i	f individual):	Meridian Diversified F	und, LLC		
	s or Residence Addi Jbany, NY 12211	ess (Number and	Street, City, State, Zip Code	e): c/o Meridian Capit	tal Partners, Inc.,	20 Corporate Woods Boulevard, 4 th
Check E	ox(es) that Apply:	Promoter	Beneficial Owner		Director	General and/or Managing Partner
Full Nan	ne (Last name first, i	f individual):	Lawrence, William H.		·	
	s or Residence Addr lbany, NY 12211	ress (Number and	Street, City, State, Zip Code	e): c/o Meridian Capit	tal Partners, Inc.,	20 Corporate Woods Boulevard, 4 th
Check E	ox(es) that Apply:	Promoter	☐ Beneficial Owner		Director	General and/or Managing Partner
Full Nan	ne (Last name first, i	f individual):	Halldin, Donald J.			
	s or Residence Addr Jbany, New York 1		Street, City, State, Zip Code	e): c/o Meridian Capit	tal Partners, Inc.,	20 Corporate Woods Boulevard, 4 th
Check E	lox(es) that Apply:	Promoter	☐ Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner
Full Nan	ne (Last name first, i	f individual):	Sica, John			
	s or Residence Addr Ilbany, NY 12211	ess (Number and	Street, City, State, Zip Code	e): c/o Meridian Capil	tal Partners, Inc.,	20 Corporate Woods Boulevard, 4 th
Check E	ox(es) that Apply:	Promoter	☐ Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner
Full Nan	ne (Last name first, i	f individual):	Hickey, Timothy M.			
	s or Residence Addr Ibany, NY 12211	ess (Number and	Street, City, State, Zip Code	e): c/o Meridian Capit	tal Partners, Inc.,	20 Corporate Woods Boulevard, 4 th
Check B	ox(es) that Apply:	Promoter	Beneficial Owner	☑ Executive Officer	☐ Director	General and/or Managing Partner
Full Nan	ne (Last name first, i	f individual):	Smith, Laura K.			
	s or Residence Addr Ibany, NY 12211	ess (Number and	Street, City, State, Zip Code	e): c/o Meridian Capit	tal Partners, Inc.,	20 Corporate Woods Boulevard, 4 th
Check B	ox(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Nan	ne (Last name first, i	f individual):				
Busines	s or Residence Addr	ess (Number and	Street, City, State, Zip Code	a):		
Check B	ox(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Nan	ne (Last name first, i	f individual):				
Busines	s or Residence Addr	ess (Number and	Street, City, State, Zip Code) ;		
Check B	ox(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					В.	INFORM	MATION	ABOUT	OFFER	ING			
	Has the issu				Answer	also in App	endix, Co	lumn 2, if f	iling under	ULOE.			☑ No 000,000* y be waived
3.	Does the off	ering permi	t joint own	ership of a	single uni	t?						⊠ Yes	□ No
	Enter the info any commiss offering. If a and/or with a associated p	ion or simi person to l state or st	lar remune be listed is ates, list th	eration for an associ e name of	solicitation ated perso f the broke	of purcha on or agen r or dealer	sers in cor t of a broke r. If more t	nnection w er or deale than five (5	ith sales of r registere (i) persons	f securities d with the to be liste	s in the SEC d are		
Full N	lame (Last n	ame first, it	f individual)									
Busir	ess or Resid	lence Addr	ess (Numt	er and Str	eet, City, S	State, Zip	Code)				. <u>-</u>		
Name	of Associat	ed Broker	or Dealer										
_	s in Which P	tates" or c	heck indivi	dual State							☐ (HI)		All States
[N		[AZ]	-								[MS]		
☐ [N				[ил]					[OH]				
□ [R						-	[VA]	-					
Full N	lame (Last n	ame first, it	f individual)									···
Busir	ess or Resid	lence Addr	ess (Numb	er and Str	eet, City, S	State, Zip	Code)						
Name	of Associat	ed Broker	or Dealer										
	s in Which P Check "All S												☐ All States
□ [A		☐ [AZ]			•						☐ [HI]	[ID]	
☐ (it] 🔲 [IN]	[AI]	☐ [KS]	☐ [KY]	☐ [LA]	☐ [ME]	[MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	☐ [MO]	
□ [N	η 🔲 [NE]	□ [NV]	□ [NH]	[NJ]	☐ [NM]	□ [NY]	☐ [NC]	[ND]	□ [OH]	□ [ОК]	□ [OR]	☐ [PA]	
☐ [R	i] 🔲 [sc]	[SD]	☐ [TN]	□ (TX)	[TU]	[[[V]	[VA]	[WA]	□ [WV]	□ [WI]		[PR]	<u> </u>
Full	ame (Last n	ame first, it	individual)									
Busir	ess or Resid	ence Addr	ess (Numb	er and Str	eet, City, S	State, Zip	Code)						
Name	of Associat	ed Broker o	or Dealer						-				
	s in Which P Check "All S												☐ All States
□ [A	_				☐ [CO]			□ (DC)	[FL]	☐ [GA]	[HI]	□ (ID)	
ן [וו] [IN]	□ [IA]	□ [KS]	☐ [KY]	□ [LA]	☐ [ME]	☐ [MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	[MO]	
□ [M	Π [NE]	□ [NV]	□ [NH]	□ [N]	□ [NM]	□ [NY]	☐ [NC]		[OH]		[OR]		
□ [R] [sc]	☐ (SD)	□ [TN]	[TX]		[1√1]	□ [VA]	[WA]	[VV]	[WI]		[PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C.	OFFERING PRICE, N	IUMBER OF	INVESTORS.	EXPENSES AND	USE OF PROCEEDS
٠.	• • • • • • • • • • • • • • • • • • •			in the second of	

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and				
	already exchanged. Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$	0	\$	0
	Equity	. \$	0	\$	0_
	☐ Common ☐ Preferred			-	
	Convertible Securities (including warrants)	\$	0	\$	0
	Partnership Interests	. <u>\$</u>	1,000,000,000	<u>\$</u>	221,912,629
	Other (Specify)	. <u>\$</u>	0	\$	0
	Total	\$	1,000,000,000	<u> </u>	221,912,629
2.	Answer also in Appendix, Column 3, if filing under ULOE Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	·	71	<u>\$</u>	221,912,629
	Non-accredited Investors	·	0	<u> </u>	0
	Total (for filings under Rule 504 only)		0		0
3.	Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1.		Turns of		Dollar Amount
	Type of Offering		Types of Security		Sold
	Rule 505		n/a	<u> </u>	n/a
	Regulation A		n/a	<u> </u>	n/a_
	Rule 504	_	n/a	<u> </u>	n/a
	Total		n/a	<u>\$</u>	n/a
1 .	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees		🗆	<u>\$</u>	0
	Printing and Engraving Costs		🗆	\$	0
	Legal Fees		🛛	\$	20,000
	Accounting Fees		🖾	\$	70,000
	Engineering Fees	•••••	🗆	\$	0
	Sales Commissions (specify finders' fees separately)	•••••	🗆	\$	0
	Other Expenses (identify)		🗆	<u>\$</u>	0
	Total		🛮	\$	90,000

	C. OFFERING PRICE, NUMBE	ER OF INVESTORS, EXP	ENSES	AND USE	UF PRU	CEEDS		
4	b. Enter the difference between the aggregate offering Question 1 and total expenses furnished in response to F "adjusted gross proceeds to the issuer."	Part C-Question 4.a. This difference	ence is the			<u>\$</u>		999,910,000
5	Indicate below the amount of the adjusted gross proceed used for each of the purposes shown. If the amount for a estimate and check the box to the left of the estimate. The adjusted gross proceeds to the issuer set forth in response	any purpose is not known, furnis ne total of the payments listed m	h an ust equal	Óf Dire	nents to ficers, ectors & filiates			Payments to Others
	Salaries and fees			<u>\$</u>		_ 🗆	\$	
	Purchase of real estate	•••••		\$		_ 🗆	\$	
	Purchase, rental or leasing and installation of made	chinery and equipment		\$		_ 🗆	\$	
	Construction or leasing of plant buildings and faci	lities		\$		_ 🗆	\$	
	Acquisition of other businesses (including the value offering that may be used in exchange for the ass pursuant to a merger	ets or securities of another issue	er	\$		_ 🗆	\$	
	Repayment of indebtedness			\$		_ 🗆	\$	
	Working capital			\$		_ 🗆	\$	
	Other (specify): Investment in Partnership Interes	ts		\$		_ 🛛	\$	999,910,000
				\$		_ 🗆	\$	
	Column Totals			\$		_ 🛛	\$	999,910,000
	Total payments Listed (column totals added)				⋈ <u>\$</u>	99	9,910,	000
•		D. FEDERAL SIGNATU	IRE	· 2000				
CO	is issuer has duly caused this notice to be signed by the unstitutes an undertaking by the issuer to furnish to the U.S the issuer to any non-accredited investor pursuant to para	ndersigned duly authorized pers	on. If this	notice is filed	l under Rule	e 505, the	follov	ving signature mation furnished
lss	suer (Print or Type)	Signature 1/	4	- -		Date	2/12	107
	eridian Diversified Fund, L.P.	/ Man	NI				5/12	<u>-10+</u>
B _y	me of Signer (Print or Type) r: Meridian Diversified Fund, LLC, General Partner r: Meridian Capital Partners, Inc., Managing Member, r: Laura K. Smith	Title of Signer (Print or Type) Managing Director of the Ma	ınaging Me	ember of the	General P	'artner		
		<u> </u>						·

ATTENTION

		E. STATE SIGNATURE	77
1.	Is any party described in 17 CFR 230.262 presentl provisions of such rule?	ly subject to any of the disqualification	Yes No
	See Appr	endix, Column 5, for state response.	
2.	The undersigned issuer hereby undertakes to furn (17 CFR 239.500) at such times as required by sta	ish to any state administrator of any state in which this notic ate law.	ce is filed a notice on Form D
3.	The undersigned issuer hereby undertakes to furn	ish to the state administrators, upon written request, information	ation furnished by the issuer to offerees.
4.	The undersigned issuer represents that the issuer Exemption (ULOE) of the state in which this notice of establishing that these conditions have been sa	is familiar with the conditions that must be satisfied to be en a is filed and understands that the issuer claiming the availa tisfied.	ntitled to the Uniform limited Offering billty of this exemption has the burden
	suer has read this notification and knows the contents rized person.	to be true and has duly caused this notice to be signed on	its behalf by the undersigned duly
	(Print or Type) ian Diversified Fund, L.P.	Signature MMMTZ	Date 3/12/07
By: M By: M	of Signer (Print or Type) leridian Diversified Fund, LLC, General Partner leridian Capital Partners, Inc., Managing Member, aura K. Smith	Title of Signer (Print or Type) Managing Director of the Managing Member of the Ge	eneral Partner

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				API	PENDIX	9 F			
							<u> </u>		
1	2	2	3		•	4		5 Disquali	
	Intend to non-ad investors (Part B -	ccredited s in State	Type of security and aggregate offering price offered in state (Part C – Item 1)	ate ce Type of investor and ate amount purchased in State m 1) (Part C – Item 2)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL	100						· · · · -		-
AK									
AZ				<u> </u>					
AR							<u> </u>		
CA		х	LP Interests	14	\$33,950,000	0	\$0		х
со		х	LP Interests	1	\$2,400,000	0	\$0		х
СТ		х	LP Interests	3	\$25,945,000	0	\$0		Х
DE		х	LP Interests	2	\$3,000,000	0	\$0		х
DC				<u> </u>					
FL		Х	LP Interests	4	\$3,925,000	0	\$0		х
GA		х	LP Interests	7	\$6,014,493	0	\$0		Х
НІ		х	LP Interests	1	\$1,000,000	0	\$0		х
ID	• • • • • • • • • • • • • • • • • • • •								
IL		Х	LP Interests	2	\$38,200,000	0	\$0		Х
IN		х	LP Interests	1	\$1,000,000	0	\$0		Х
IA				· · · · · ·					
КS									
KY				-					
LA		х	LP Interests	4	\$2,777,839	0	\$0		×
ME		Х	LP Interests	2	\$4,181,000	0	\$0		X
MD		Х	LP Interests	1	\$1,000,000	0	\$0		X
MA		Х	LP Interests	2	\$680,000	0	\$0		Х
MI		х	LP Interests	1	\$613,653	0	\$0		X
MN								ļ	
MS							· ,		
МО		х	LP Interests	1	\$474,000	0	\$0		X
MT									<u> </u>
NE									<u> </u>
NV									
NH									<u> </u>
NJ									<u> </u>

				AP	PENDIX		% &		
1	2	2	3			4		5	<u> </u>
	to non-ad	to sell ccredited s in State - Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investor and Amount purchased in State (Part C – Item 2)				fication te ULOE atlach ation of granted) • Item 1)
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
NM									
NY		Х	LP Interests	5	\$17,404,926	0	\$0		X
NC									
ND									
ОН		х	LP Interests	2	\$10,020,305	0	\$0	ļ	X
ок									
OR		Х	LP Interests	1	\$500,000	0	\$0	<u> </u>	Х
PA		х	LP Interests	1	\$2,000,000	0	\$0		Х
RI									
sc									ļ
SD							- 		ļ
TN		Х	LP Interests	6	\$34,526,214	0	\$0	 	X_
TX		Х	LP Interests	2	\$1,500,000	0	\$0	ļ	Х
UT								ļ	<u> </u>
VT				<u>-,</u>			· -	ļ <u>.</u>	
VA		Х	LP Interests	2	\$3,600,000	0	\$0	ļ .	X
WA		Х	LP Interests	2	\$2,000,000	0	\$0	<u> </u>	X
wv		X	LP Interests	11	\$2,200,000	0	\$0	ļ	X
WI									
WY									<u> </u>
Non- US		x	LP Interests	2	\$23,000,200	0	\$0		x

